

Applicants: Gregory Scott Duncan et al.

Serial No.: 09/925,389

Art Unit: 2873

Filed : August 9, 2001

Examiner:

: SYSTEM AND METHOD FOR INTELLIGENT LENS TRANSFER

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231 on

January 28, 2002

(Date of Deposit)

Anne B. Kiernan

(Name of applicant, assignee, or Registered Representative)

(Signature)

January 28, 2002

(Date of Signature)

BOX MISSING PARTS  
Commissioner for Patents  
Washington, D.C. 20231

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

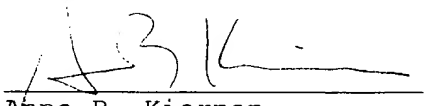
Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Gregory Scott Duncan et al. entitled System And Method For Intelligent Lens Transfer attorney Docket No.VTN-552, to complete, pursuant to Rule 51, this application filed on August 9, 2001 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

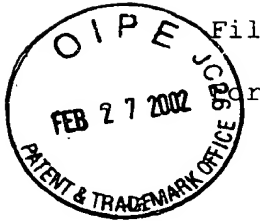
An error is noted on the Filing Receipt and a copy with the changes noted thereon is attached hereto. Please issue a Corrected Filing Receipt.

Please charge Johnson & Johnson Deposit Account No. 10-0750/VTN-553/AK in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/VTN-553/AK. This sheet is submitted in triplicate.

Respectfully submitted,

  
Anne B. Kiernan  
Reg. No. 36,566  
Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
(732) 524-2724



COPY OF PAPER  
ORIGINALLY FILED

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Richard W.		Family Name or Surname Leavitt	
Inventor's Signature <i>Richard W. Leavitt</i>		Date 1/14/02	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address 2001 Hodges Boulevard, Apt. 1118			
City Jacksonville	State FL	ZIP 32224	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Welton I.		Family Name or Surname Davis III	
Inventor's Signature <i>Welton I. Davis III</i>		Date 1/15/02	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address 2249 Wahine Drive East			
City Jacksonville	State FL	ZIP 32246	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Gregory Scott		Family Name or Surname Duncan	
Inventor's Signature <i>Gregory S. Duncan</i>		Date 1/14/02	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address 4128 Shirley Avenue			
City Jacksonville	State FL	ZIP 32210	Country USA

**COPY OF PAPERS  
ORIGINALLY FILED**

Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002: OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<div style="text-align: center;"> <b>DECLARATION AND STATEMENT OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Declaration Submitted with Initial Filing             <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)           </div>	Attorney Docket Number	VTN-0552
	First Named Inventor	Scott Duncan et al.
	<b>COMPLETE IF KNOWN</b>	
	Application Number	09/925,389
	Filing Date	August 9, 2001
	Group Art Unit	2873
Examiner Name		

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.  
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEM AND METHOD FOR INTELLIGENT LENS TRANSFER**  
*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 08/09/2001 as United States Application Number or PCT International Application Number 09/925,389 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
<div style="position: relative;"> <div style="position: absolute; top: -40px; left: 50px; border: 1px solid black; border-radius: 50%; padding: 5px; transform: rotate(-45deg);">           O T P E            FEB 27 2002            PATENT &amp; TRADEMARK OFFICE         </div> <div style="border: 1px solid black; height: 40px;"></div> </div>	<div style="border: 1px solid black; height: 40px;"></div>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
<b>Application Serial No.</b>	<b>Filing Date</b>	<b>Status</b>
		Patented Patented Patented
I hereby appoint: <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div> <input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 2px 10px;">000027777</span> </div> <div style="text-align: right;">             Place Customer              Number Bar Code              Label Here           </div> </div> <p style="margin-top: 10px; text-align: center;"><b>AND</b></p> <div> <input type="checkbox"/> Practitioner(s) named below:           <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div><u>Name</u></div> <div><u>Registration Number</u></div> </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to Anne B. Kiernan at telephone number (732) 524-2724.		
Direct all correspondence to: <div style="display: flex; align-items: center; margin-top: 5px;"> <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; padding: 2px 10px;">000027777</span> <div style="margin: 0 10px;">OR</div> <input type="checkbox"/> Correspondence address below           </div>		
<b>Name:</b>		
<b>Address:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP</b>
<b>Country</b>	<b>Telephone:</b>	<b>Fax:</b>

**COPY OF PAPERS  
ORIGINALLY FILED**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FOURTH INVENTOR:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Michael J.		Family Name or Surname Strong	
Inventor's Signature <i>Michael J. Strong</i>		Date 01/14/02	
Residence: City Jacksonville		State FL	Country USA
Citizenship USA			
Mailing Address 4458 Summer Haven Boulevard			
City Jacksonville		State FL	ZIP 32258
Country USA			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Marinus Franciscus Johannes		Family Name or Surname Evers	
Inventor's Signature		Date	
Residence: City Heeze		State	Country Netherlands
Citizenship Netherlands			
Mailing Address Ginderover 33			
City 5591 JM Heeze		State	ZIP
Country Netherlands			

**COPY OF PAPERS  
ORIGINALLY FILED**

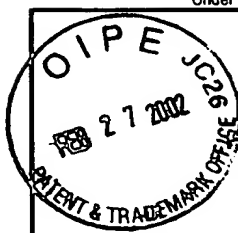
Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<div style="text-align: center;">  <p><b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b></p> <p><input type="checkbox"/> Declaration Submitted with Initial Filing      <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)      OR</p> </div>	Attorney Docket Number	VTN-0552																										
	First Named Inventor	Scott Duncan et al.																										
	<i>COMPLETE IF KNOWN</i>																											
	Application Number	09/925,389																										
	Filing Date	August 9, 2001																										
	Group Art Unit	2873																										
Examiner Name																												
<p><b>As a below named inventor, I hereby declare that:</b></p> <p>My residence, mailing address, and citizenship are as stated below next to my name.          I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p>																												
<p><b>SYSTEM AND METHOD FOR INTELLIGENT LENS TRANSFER</b>  <i>(Title of the Invention)</i></p>																												
<p>the specification of which</p> <p><input type="checkbox"/> is attached hereto</p> <p>OR</p> <p><input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) <u>08/09/2001</u> as United States Application Number or PCT International Application Number <u>09/925,389</u> and was amended on (MM/DD/YYYY)</p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p>																												
<p>I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">Prior Foreign Application Number(s)</th> <th style="width:15%;">Country</th> <th style="width:15%;">Foreign Filing Date (MM/DD/YYYY)</th> <th style="width:15%;">Priority Not Claimed</th> <th style="width:30%;">Certified Copy Attached? YES      NO</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/>      <input type="checkbox"/></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/>      <input type="checkbox"/></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/>      <input type="checkbox"/></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/>      <input type="checkbox"/></td> </tr> </tbody> </table>				Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO				<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO																								
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>																								
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>																								
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>																								
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>																								
<p><input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:</p>																												

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
<b>Application Number(s)</b>	<b>Filing Date (MM/DD/YYYY)</b>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
<b>Application Serial No.</b>	<b>Filing Date</b>	<b>Status</b>
		Patented Patented Patented
I hereby appoint:  <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 2px 10px;">000027777</span> </div> <div style="text-align: right;">             Place Customer              Number Bar Code              Label Here           </div> </div> <p align="center"><b>AND</b></p> <div> <input type="checkbox"/> Practitioner(s) named below:  <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span><u>Name</u></span> <span><u>Registration Number</u></span> </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to Anne B. Kiernan at telephone number (732) 524-2724.		
Direct all correspondence to:      Customer Number <input checked="" type="checkbox"/> or Bar Code Label <span style="border: 1px solid black; padding: 2px 10px;">000027777</span> OR <input type="checkbox"/> Correspondence address below		
<b>Name:</b>		
<b>Address:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP</b>
<b>Country</b>	<b>Telephone:</b>	<b>Fax:</b>

115

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name (first and middle [if any])</b> Richard W.		<b>Family Name or Surname</b> Leavitt	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Jacksonville	<b>State</b> FL	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 2001 Hodges Boulevard, Apt. 1118			
<b>City</b> Jacksonville	<b>State</b> FL	<b>ZIP</b> 32224	<b>Country</b> USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name (first and middle [if any])</b> Welton I.		<b>Family Name or Surname</b> Davis III	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Jacksonville	<b>State</b> FL	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 2249 Wahine Drive East			
<b>City</b> Jacksonville	<b>State</b> FL	<b>ZIP</b> 32246	<b>Country</b> USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF THIRD INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name (first and middle [if any])</b> Gregory Scott		<b>Family Name or Surname</b> Duncan	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Jacksonville	<b>State</b> FL	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 4128 Shirley Avenue			
<b>City</b> Jacksonville	<b>State</b> FL	<b>ZIP</b> 32210	<b>Country</b> USA

1/1E



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Michael J.

Family Name  
or Surname Strong

Inventor's  
Signature

Date

Residence: City Jacksonville

State FL

Country USA

Citizenship USA

Mailing Address 4458 Summer Haven Boulevard

City Jacksonville

State FL

ZIP 32258

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Marinus Franciscus Johannes

Family Name  
or Surname Evers

Inventor's  
Signature

Date

21-JANUARY-2002

Residence: City Heeze

State

Country Netherlands

Citizenship Netherlands

Mailing Address Ginderover 33

City 5591 JM Heeze

State

ZIP

Country Netherlands

1/E